STEWARDS RULING

HORSERACING INTEGRITY AND SAFETY AUTHORITY

HISA Case Number:	**Violation Date** (mm/dd/yyyy):
State Tracking Number: **(optional)**	**Ruling Date** (mm/dd/yyyy):
Track Name:	**Track HISA ID:**
Issued To:	
HISA ID:	
Name:	

VIOLATION INFORMATION

Rule Number Violated:

If Applicable

Race: Horse Name: Horse HISA ID:

RULING

Ruling and Statement of Factual Basis (Attach additional pages as necessary):

Fine Amount ($):	Days to pay fine:
Points:	Class of Violation:
Disqualified (DQ'd): ☐ Yes ☐ No	Purse Amount To Be Repaid ($):

Suspension (Either Consecutive Calendar Days or Race Days)

Consecutive Calendar Days Suspended

Start Date (mm/dd/yyyy):	Duration (days):

--- OR ---

Race Days Suspended (mm/dd/yyyy)

Day 1:	Day 6:
Day 2:	Day 7:
Day 3:	Day 8:
Day 4:	Day 9:
Day 5:	Day 10:

Consecutive Calendar Days Suspended Pursuant to Rule 2283 "Multiple Violations"

Start Date (mm/dd/yyyy):	Duration (days):

Other Actions to Be Completed:

Date to Be Completed (mm/dd/yyyy):

Steward Signature(s)

Name	HISA ID	Signature

APPEAL INFORMATION

Any Stewards ruling finding a violation may be appealed to the IAP pursuant to Rule 2285(c) by filing a written request for appeal with the Board within 10 days of the issuance of the Stewards ruling. Rule 2285(c) specifies the information that must be included in the written request for appeal. An appeal to the Board will not automatically stay the Stewards ruling. A stay must be requested. The Board may issue a stay for good cause shown.

PAYMENT INFORMATION

Payment must be received by due date to avoid further penalties. Option 1) Pay online on the HISA Portal (portal.hisausapps.org) or Option 2) Send check with a copy of this ruling form to:

Horseracing Integrity and Safety Authority
201 East Main Street, Suite 340
Lexington, Kentucky
40507